



JOSHUA RYDELL  
MAYOR

September 24, 2018

Chairman Steve King  
Congress of the United States  
House of Representatives  
Committee on the Judiciary  
Subcommittee on the Constitution  
and Civil Justice  
2138 Rayburn House Office Building  
Washington, D.C. 20515-6216

Ranking Member Steve Cohen  
Congress of the United States  
House of Representatives  
Committee on the Judiciary  
Subcommittee on the Constitution  
and Civil Justice  
2138 Rayburn House Office Building  
Washington, D.C. 20515-6216

Re: Hearing Examining Sober Living Homes before the Subcommittee on the  
Constitution and Civil Justice

Dear Honorable Sirs, King and Cohen:

Thank you for taking into account the thoughts and concerns of the City of Coconut Creek in the Subcommittee's upcoming hearing on the subject of Examining Sober Living Homes.

Coconut Creek is a municipality located in Broward County, Florida. While we do not have a lot of sober living homes here (presumably on account of the many deed-restricted residential subdivisions that we have that are under the control of a homeowner's association), I am very familiar with them in my day job as a criminal defense attorney representing clients through court-ordered treatment and the continuum care. Those clients often end up living in a sober living home. I also serve on the Substance Abuse Advisory Board of Broward County whose charge is to develop strategies for individuals stricken with substance use disorder. Further, our City Attorney, Terrill C. Pyburn, former City Attorney of Delray Beach, has extensive experience on the subject of sober living homes and the Fair Housing Act based on her experience working with the subject matter for over seventeen (17) years. She worked with State legislators on drafting State legislation regarding sober living homes, worked with Federal legislators in getting the DOJ/HUD Joint Statement on State and Local Land Use Law and Practices, and the Application of the Fair Housing Act amended in 2016, she has been a member of the Palm Beach County State Attorney's Sober House Task Force Board for the last three (3) years, and she assisted in drafting Delray Beach's Ordinance #25-17 (2017), which provided for mandatory certification of recovery residences. Together, our City Attorney and I have over 30 years of experience regarding sober living homes and the law, therefore, I hope that you will see that the City of Coconut Creek is more well-versed on this subject than most cities.

Chairman Steve King  
Ranking Member Steve Cohen  
September 24, 2018  
Page three

H.R. 5311 is the best piece of legislation that I have seen in the House related to sober living home regulations thus far. It proposes to fund a national drug awareness campaign, provides a three day limit on prescribing opioids, provides \$300 million in funds annually to make naloxone available to first responders and to train on how to use it, it requires the Department of Health and Human Services to issue best practices for operating recovery housing nationwide based on the NARR standards, it requires the use of the prescription drug monitoring program to track opioid prescriptions by doctors nationwide and it increases civil and criminal penalties for opioid manufacturers that fail to report suspicious orders. This is the most comprehensive piece of legislation out there to address our National Opioid Epidemic. It covers everything from beginning to end, from the first time a doctor prescribes a patient an opioid all the way through to providing for the best standards for operating sober living homes in order to help patients recover, not relapse. This is the legislation that I and my fellow commissioners supported recently when we passed Resolution 2018-192 urging our Federal legislators to support same (attached hereto as Exhibit "1").

Vulnerable residents of sober living homes need protection. They need access to safe and sober living environments free from drugs, alcohol, abuse, exploitation, fraud, inadequate support and care, and theft of their funds and/or possessions. Oversight of sober living homes can be accomplished through a consistent national standard of best practices implemented in each state through licensure and/or certification in accordance with NARR standards. Such a law will protect consumers of sober living home services nationwide, will help avoid relapse and resulting homelessness, and will likely help reduce the amount of overdoses on a national scale. Please support H.R. 5311 to help prevent addiction, prevent abuse and exploitation of persons residing in sober living homes with unscrupulous operators, and help save lives.

Sincerely,



Joshua Rydell  
Mayor

cc: Congressman Ted Deutch  
City of Coconut Creek City Commission  
Mary C. Blasi, City Manager  
Terrill C. Pyburn, City Attorney

**WHEREAS**, by acknowledging all those who have been affected by prescription drug poisoning (overdose), we can help the general public understand its effects on our communities, including the community of Coconut Creek, Florida; and

**WHEREAS**, the City of Coconut Creek remains committed to raising awareness about prescription drug poisoning (overdose) prevention in order to combat stigma and educate our community; and

**WHEREAS**, the City of Coconut Creek urges the support of these two very comprehensive bills that provide for public education and prescribing limits by doctors on a national level and provide funding to local governments and first responders for naloxone and training:

A. S. 2456, "The Comprehensive Addiction and Recovery Act (CARA) 2.0," was introduced into the Committee on Health, Education, Labor, and Pensions on February 27, 2018 and it proposes to:

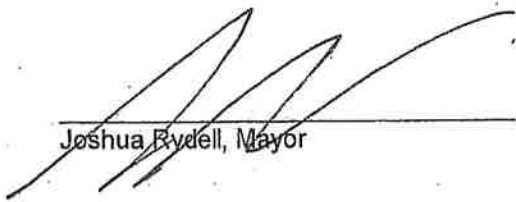
1. Fund a national drug awareness campaign, and
2. Provide limits on initial prescriptions for opioids by limiting them to three (3) days while exempting chronic care (i.e. cancer and/or palliative care), and
3. Provide \$300,000,000 in funds annually to make naloxone available to first responders and train them to use it, and
4. Require the Department of Health and Human Services to issue quality standards and best practices for operating recovery housing in the United States based on National Alliance of Recovery Residences (NARR) standards, require the use of the prescription drug monitoring program database to track opioid prescriptions (for doctors nationwide), and
5. To increase civil and criminal penalties for opioid manufacturers that fail to report suspicious orders, and

**Section 3:** That the City Clerk is hereby directed to transmit a certified copy of this Resolution to Senator Bill Nelson, Senator Marco Rubio, Congressman Ted Deutch, the National League of Cities, the Florida League of Cities, and the Broward League of Cities.

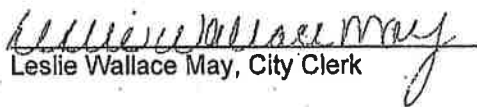
**Section 4:** That if any clause, section, other part or application of this Resolution is held by any court of competent jurisdiction to be unconstitutional or invalid, in part or in application, it shall not affect the validity of the remaining portions or applications of this Resolution.

**Section 5:** That this Resolution shall be in full force and effect immediately upon its adoption.

Adopted this 13th day of September, 2018.

  
Joshua Rydell, Mayor

Attest:

  
Leslie Wallace May, City Clerk

Rydell	<u>Aye</u>
Welch	<u>Aye</u>
Tooley	<u>Aye</u>
Sarbone	<u>Aye</u>
Belvedere	<u>Aye</u>

Delray Beach  
Florida



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**CITY OF DELRAY BEACH**



100 N.W. 1ST AVENUE ~ DELRAY BEACH, FLORIDA 33444 ~ (561) 243-7010

September 25, 2018

Chairman Steve King  
Congress of the United States  
House of Representatives  
Committee on the Judiciary  
Subcommittee on the Constitution  
and Civil Justice  
2138 Rayburn House Office Building Washington, D.C. 20515-6216

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Re: Hearing Examining Sober Living Homes before the Subcommittee on the Constitution  
and Civil Justice

Dear Honorable Sirs, King and Cohen:

Thank you for taking into account the thoughts and concerns of the City of Delray Beach in the Subcommittee's upcoming hearing on the subject of Examining Sober Living Homes.

Delray Beach is a municipality located in Palm Beach County, Florida. It is uniquely situated to respond with an opinion on the various recent drafts of Federal legislation regarding sober living homes. In 2009, Delray Beach was labeled as the "Recovery Capital of America" by the New York Times.

Beginning around 2012, as a result of increased homelessness, drug overdoses, and abuse and exploitation of residents of sober living homes run by unscrupulous operators located in the City, the City began to work with State legislators to draft state legislation to provide for mandatory certification of recovery residences statewide by the Florida Association of Recovery Residences (FARR), the Florida equivalent to the National Alliance

In contrast, the Grand Jury has seen evidence of horrendous abuses that occur in recovery residences that operate with no standards. For example, some residents were given drugs so that they go back into detox, some were sexually abused, and others were forced to work in labor pools. There is currently no oversight on these businesses that house this vulnerable class. Even community housing that is part of a DCF [Department of Children and Families] license has no oversight other than fire code compliance. This has proven to be extremely harmful to patients.

See, Report on the Proliferation of Fraud and Abuse in Florida's Addiction Treatment Industry, Report on the Proliferation of Fraud and Abuse in Florida's Addiction Treatment Industry, (Dec. 8, 2016) 16-17 as cited in Delray Beach, Florida: Principles to Guide Zoning for Community Residences for People with Disabilities, at 4 (August 2017).

We need to enact laws that encourage recovery and prevent relapse and overdoses by protecting the consumers. H.R. 472, 4684 and 5100 provide a good place to start, but they do not go far enough. And H.R. 5724 goes too far because it prohibits recovery facilities (sober living homes) from locating in residentially zoned areas in contradiction to the Fair Housing Act. Further, it removes substance use disorder as an "essential health benefit" under the Patient Protection and Affordable Care Act at a time when we most need it to be included. Most people cannot afford to pay for treatment out of pocket. To remove the ability to have health insurance carriers pay for the treatment that is necessary to overcome this very deadly disorder is irresponsible and reckless. H.R. 5724 creates additional roadblocks and does nothing to actually protect the consumer of sober living home services.

I urge you to support H.R. 5311. This is the best piece of legislation that I have seen in the House related to sober living home regulations. It proposes to fund a national drug awareness campaign, provides a three day limit on prescribing opioids, provides \$300 million in funds annually to make naloxone available to first responders and to train on how to use it, it requires the Department of Health and Human Services to issue best practices for operating recovery housing nationwide based on the NARR standards, it requires the use of the prescription drug monitoring program to track opioid prescriptions by doctors nationwide and it increases civil and criminal penalties for opioid manufacturers that fail to report suspicious orders. This is the most comprehensive piece of legislation out there to address our National Opioid Epidemic. It covers everything from beginning to end, from the first time a doctor prescribes a patient an opioid all the way through to providing for the best standards for operating sober living homes in order to help patients recover, not relapse.

Vulnerable residents of sober living homes need protection. They need access to safe and sober living environments free from drugs, alcohol, abuse, exploitation, fraud, inadequate support and care, and theft of their funds and/or possessions. Oversight of sober living homes can be accomplished through a consistent national standard of best practices implemented in each state through licensure and/or certification in accordance with NARR standards. Such a law will protect consumers of sober living home services nationwide, will help avoid relapse and resulting homelessness, and will likely help reduce the amount of overdoses on a national scale, similarly to the reduction in overdoses that we have seen

From: Steve Farnsworth, Executive Director, Florida Association of Recovery Residences

To: Congressman Ted Deutch

Cc: Dave Sheridan [dmsheridan@verizon.net](mailto:dmsheridan@verizon.net)  
Carol McDaid [cmcdaid@capitoldecisions.com](mailto:cmcdaid@capitoldecisions.com)  
Michael Allen [mallen@relmanlaw.com](mailto:mallen@relmanlaw.com)  
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John Lehman [jlehman@farronline.org](mailto:jlehman@farronline.org)  
Sara Pratt [spratt@relmanlaw.com](mailto:spratt@relmanlaw.com)  
Steve Farnsworth [steve@farronline.org](mailto:steve@farronline.org)

Attachments:

Recovery Housing Policy Guide  
Sober Living Homes Testimony – M. Allen

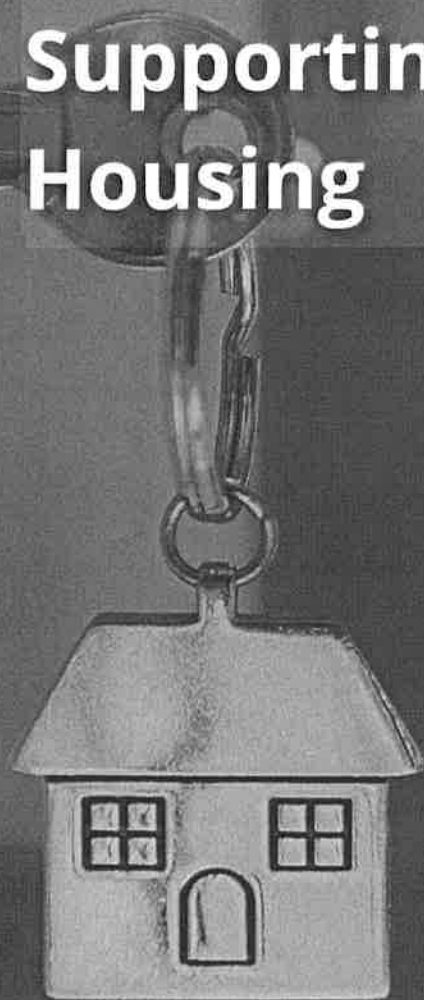
We understand that the House Judiciary Subcommittee on the Constitution and Civil Justice, of which Representative Deutch is a member, will hear testimony on recovery residences Friday September 28, 2018.

The Florida Association of Recovery Residences (FARR) is the subject matter expert and credentialing body selected by the Florida Department of Children and Families to certify recovery residences to criteria set forth in F.S. 397.487 ***Voluntary Certification of Recovery Residences***. The State of Florida recognizes quality recovery housing as a vital tool in combatting the addiction crisis currently facing our nation. We share Congress' concerns about bad actors in the addiction treatment and recovery residence sectors. FARR participated in the GOA Recovery Housing study and is an active supporter of law enforcement efforts to rid our service sectors of unethical predators.

As the Florida Affiliate of the National Alliance for Recovery Residences (NARR), FARR is dedicated to dissemination of best practices in support of consumers, families and communities. Please find the attached policy guide prepared by the National Council for Behavioral Health and NARR that specifically addresses many of the important issues that may be discussed at the hearing. We request that you introduce this guide as part of the hearing record. These recommendations are consistent with existing civil rights laws while addressing the problem of bad operators.

Testimony at the hearing may suggest, among other things, that certain civil rights protections, particularly fair housing protections, be curtailed for tens of thousands of vulnerable individuals in early recovery from substance use disorders. Last year more than 72,000 Americans died from drug overdoses, including illicit drugs and prescription opioids...a 2-fold increase in a decade, according to the Centers for Disease Control. Recovery housing plays a valuable role in fighting this epidemic. It has been cited as a needed resource by the Surgeon General and by the President's Commission on Combating Drug Addiction and the Opioid Crisis. Congressional action to limit individuals' ability to access safe and supportive recovery housing would greatly undermine all other efforts to stem the tide of the overdose epidemic.

# Building Recovery: State Policy Guide for Supporting Recovery Housing



[www.TheNationalCouncil.org](http://www.TheNationalCouncil.org)



# RECOVERY HOUSING TOOLKIT

## EXECUTIVE SUMMARY

Over the past decade, and especially in the last two years, there has been growing awareness among both the public and policymakers about the devastating effects and costs of addiction in the United States. The Surgeon General released a landmark report on Facing Addiction in America (2016) and the President's Commission on Combating Drug Addiction and the Opioid Crisis (2017) made a series of wide-reaching policy recommendations on the federal level, emphasizing the urgency and commitment to this crisis. On every level of government and in the private sector, there are efforts under consideration to establish better policies and practices to prevent addiction and improve the treatment and outcomes for people in recovery.

The National Council for Behavioral Health and National Council partners are working to identify concrete policies and practices that policymakers can enact to strengthen the road to recovery. Those in the addiction field and recovery community have recognized that recovery housing is a central component of successful long-term recovery (National Council, 2017).

Since the 1970's, groups have established "recovery housing," which are residential environments that provide people in recovery a safe alcohol- and drug-free place to live as they transition back into the community. Recovery housing, recovery residences, recovery homes and sober living homes all refer to a range of alcohol- and drug-free housing models that create mutually-supportive communities where individuals improve their physical, mental, spiritual and social well-being and gain skills and resources to sustain their recovery. Recovery housing is a part of the larger continuum of housing, recovery support and treatment options available to individuals in recovery from addiction and helps them avoid addiction setbacks and move toward employment and healthy and fulfilling lives. Inpatient treatment programs may last as few as 12 days, but recovery from addiction is a lifelong process and for many, recovery housing is a linchpin helping people rebuild their lives through effective peer support, mutual accountability and clear social structures.

Recovery housing, recovery residences, recovery homes and sober living homes all refer to a range of alcohol- and drug-free housing models that create mutually-supportive communities where individuals improve their physical, mental, spiritual and social well-being and gain skills and resources to sustain their recovery.

Recovery housing often operates outside the traditional addiction treatment and supportive housing systems. Sometimes this is by choice, but it's also because the public sector has not broadly included this model in policies and resources. Because of this, and without codified recovery housing standards or protections, there have been inconsistencies in the quality of recovery housing, including substandard housing, insurance schemes and exploitative operators. Recent news reports have brought these inconsistencies and abuses to light and demonstrate how some so-called recovery homes manipulate weaknesses in the system and the people who are trying to achieve long-term recovery. These bad actors not only risk harming the reputation and investment in the vast majority of high quality, effective recovery housing throughout the United States, but also intentionally send people back into a terrible, often deadly, cycle of addiction.

In addition, media reports have brought important attention to the rules and regulations of recovery housing on both the federal and state level. In June 2016, Senators Elizabeth Warren (D-MA), Orrin Hatch (R-UT) and Marco Rubio (R-FL) sent a letter to the General Accounting Office (GAO) seeking a review of oversight of sober living homes.<sup>1</sup> In December of 2017, the House Energy, Ways and

1. GAO is expected to issue its report in Spring 2018.

## SECTION I: PROTECTING RECOVERY HOUSING: STANDARDS, INCENTIVES AND INVESTMENT

“ We recommend that states be given the ability to require certification under NARR (National Alliance for Recovery Residences) or similar standards, or other recognized programs such as Oxford House™ to protect the vulnerable residents living in sober homes. ”

Alan Johnson, Florida Chief Assistant to the State Attorney (December 2017, before the House Energy, Ways and Means Subcommittee hearing on Examining Concerns of Patient Brokering and Addiction Treatment Fraud)

Although there are decades of research demonstrating the impact and cost-effectiveness of recovery housing, recent media stories have highlighted how an unregulated housing service has led to abuses of an already vulnerable population. As a first step, states and localities can establish basic protections that define what constitutes recovery housing and their standards of practice. These actions will empower state addiction services agencies to direct referrals towards high-quality recovery housing. In addition, they can strengthen safety protections and help people in recovery make better choices for longer term housing. This section offers strategies and tools that can address these system vulnerabilities. The National Council for Behavioral Health (National Council) recommends that states consider legislation or regulation that:

- ▶ Defines recovery housing
- ▶ Requires recovery homes are voluntarily certified as meeting national standards
- ▶ Incentivizes referrals and funding to certified recovery homes
- ▶ Expands public awareness of recovery housing
- ▶ Invests in the development and sustainability of certified recovery housing

### DEFINE RECOVERY HOUSING

The National Council recommends that state and local policymakers first improve the quality of recovery housing by defining what constitutes recovery housing, which are also referred to as recovery residences, recovery homes, alcohol- and drug-free homes, three-quarter houses, sober living homes and Oxford House™. This will make it harder for homes to market themselves as recovery housing when they are not meeting these basic definitions. While recovery housing can vary widely in structure and implementation, core components that are central to a clear definition include:

- ▶ **A safe and supportive living environment** that prohibits residents' use of alcohol and illicit drugs on and off the premises.
- ▶ **Direct connection to peer support** and other recovery support services and, if needed, referral to clinical addiction services.

### Recovery Housing and Other Supportive Housing Initiatives

Recovery housing fits along a continuum of supportive housing models, which also include Permanent Supportive Housing (PSH) and Housing First (HF) models. All supportive housing models include a housing intervention that combines affordable housing assistance with wrap-around supportive services for people experiencing homelessness, as well as people with disabilities (United States Interagency Council on Homelessness).

## Require Standards for Recovery Housing

In addition to a clear definition of what constitutes recovery housing,<sup>2</sup> policies and legislation should require that recovery housing meets national quality standards. The National Council recommends that legislation require that recovery homes meet quality standards established in 2011 by NARR, and/or the Oxford House Model™. As long-tested standards, they provide a clear and measurable baseline for residences and also reduce the administrative effort needed to create standards on the state or local level. In 2011, the Oxford House Recovery Home Model, used as a model for §2036, was listed on the National Registry of Evidence-based Programs and Practices [NREPP].<sup>3</sup> Florida, Indiana, Pennsylvania and Rhode Island have all passed legislation that specifically refers to the NARR and Oxford models. Other states, such as Ohio and California, reference national standards more generally to allow for the emergence of other research without having to change the code in the future. Florida recently expanded their recovery housing certification statute to also address specific fraudulent and abusive practices seen commonly in the state.

Recovery homes that can market themselves as meeting national standards, such as those offered by NARR or as Oxford Houses, demonstrate their value and as a strong counterpoint to neighborhood concerns about locating these homes within communities. The National Council urges states to collaborate with and support state NARR affiliates and Oxford Houses, as they can be crucial resources in implementing and tracking maintenance of these standards. State NARR affiliates are trained to ensure that local NARR recovery homes adhere to these standards and can be an invaluable resource for states to ensure that recovery housing operators are meeting these requirements. This can significantly reduce the oversight and administrative burden for states and their local governments and is consistent with how states approach quality assurance for other types of supportive housing.

## RECOMMENDATION

The National Council recommends that states support efforts to reference nationally-recognized recovery housing quality standards in the establishment a recovery housing certification program.

### Sample Definitions of Recovery Housing:

(14) Develop standards for services provided by residential care and supported housing for chronic addiction, when used as a recovery residence, to: (A) be certified through an entity approved by the division to ensure adherence to standards determined by the National Alliance for Recovery Residences (NARR) or a similar entity; and (B) meet other standards established by the division under 34 rules adopted under IC 4-22-2. 35 SECTION 3. IC 12-21-5-1.5, AS AME.

— *Indiana Recovery Housing Law; SB 402*

### New recovery homes need time to meet requirements.

Ohio found that new recovery homes need six to nine months to put written standards into practice and the state NARR affiliate can support recovery homes with training and technical assistance during this “start-up” period. Notably, the state NARR affiliate in Ohio, Ohio Recovery Housing, receives state funding to provide ongoing technical assistance to recovery residences as they move through the certification process. Oxford House, Inc., grants charters to new Oxford Houses that require proof of competency within six months.

2. In 1988, the 1988 Federal Drug Abuse Act defined basic conditions for self-run, self-supported group recovery homes. (§2036 of PL 100-690 codified at 42 USC 300x-25).

3. On December 28, 2017, the Substance Abuse and Mental Health Services Administration suspended the registry in order to make improvements and to allow the newly-created National Mental Health and Substance Use Policy Lab to take over this responsibility. [www.samhsa.gov/newsroom/press-announcements/201801110330](http://www.samhsa.gov/newsroom/press-announcements/201801110330).

## INCENTIVIZE REFERRALS AND FUNDING TO CERTIFIED RECOVERY HOUSING

When states put clear definitions and references to national standards into statute or regulation, they add clarity to what is meant by recovery housing. This can help people in recovery and their families locate quality housing and support inpatient and outpatient treatment providers, courts and child welfare agencies looking to refer clients to high-quality recovery housing. However, voluntary standards by themselves are no guarantee of compliance or utilization. Despite this limitation, the National Council suggests that states start with voluntary standards as a first step and as a way to create the infrastructure before considering certification requirements. One approach that states have taken to strengthen these voluntary requirements is to make provider referral and/or access to funding contingent on certification of meeting national standards.

### Referrals Must Use Certified Recovery Housing

Florida and Massachusetts have enacted legislation that requires state-licensed alcohol and drug treatment providers to only refer clients to recovery housing that meets nationally-recognized standards. Such statutory requirements incentivize recovery housing operators to improve their standards by following policies and procedures to meet national certification standards and simultaneously make it difficult for substandard housing operators to secure referrals and, thereby, funding for housing services.

In addition, the National Association of Addiction Treatment Providers (NAATP) released its Ethics Code 2.0 in late 2017, which is an effort to address ongoing concerns about some of the business practices of addiction service providers in the field. The NAATP Code of Ethics is part of a larger effort to address addiction treatment and recovery services integrity nationwide. NAATP will not admit members who do not abide by ethical marketing and billing principles, which include appropriate referral practices for treatment providers to refer to recovery support services.

## RECOMMENDATION

The National Council recommends that states support efforts to incentivize the adoption of recovery housing quality standards by making the receipt of referrals dependent upon meeting recovery housing quality standards.

### Referrals Must Meet Standards

A service provider licensed under this part may not make a referral of a prospective, current, or discharged patient to, or accept a referral of such a patient from, a recovery residence unless the recovery residence holds a valid certificate of compliance as provided in s. 397.487 and is actively managed by a certified recovery residence administrator as provided in s. 397.4871.

— *Florida Substance Abuse Services Law; Section 397.487*

(h) A state agency or vendor with a statewide contract that is providing treatment or services to a person, or a state agency or officer setting terms and conditions for the release, parole or discharge of a person from custody or treatment, shall not refer that person to alcohol and drug free housing and shall not otherwise include in such terms and conditions a referral to alcohol and drug free housing unless the alcohol and drug free housing is certified pursuant to this section. Nothing in this section shall prohibit a residence that has not received certification from operating or advertising as alcohol and drug free housing or from offering residence to persons recovering from substance use disorders.

— *Massachusetts Sober Homes Law; H.1828*

## INCREASE DEDICATED FUNDING FOR RECOVERY HOUSING

The supply of addiction and recovery resources fall well short of meeting the demand presented by the growing number of individuals and families experiencing substance use disorders. Introducing a recovery housing certification program prior to understanding the status of recovery housing statewide could reduce already-scarce capacity. States can follow Ohio's model of conducting an environmental scan to determine the variability in recovery housing capacity, affordability, geographic distribution and populations served. Ohio was able to use the results of their 2013 Recovery Housing Environmental Scan to finance an expansion of overall system capacity and target resources to vulnerable subpopulations (women with children, individuals with co-occurring mental health disorders and justice-involved populations).

Recovery housing typically operates on a limited budget. Most residents must pay privately both for rent or an equal share of household expenses and for the services offered by the home; few insurance companies pay for recovery housing, and there are strict rules limiting people's ability to qualify for Social Security Disability Insurance (SSDI) around addiction.<sup>4</sup> In most states, Medicaid funds are not available for funding recovery housing or for any type of recovery support services and states are just beginning to recognize how long-term peer-led housing can be a transformative piece in the recovery puzzle.<sup>5</sup>

Recognizing that states confront significant budgetary constraints, the National Council recommends that states and local communities identify creative ways to fund recovery homes that meet national standards and restrict investments to low-quality programs. Key areas where states and localities may want to consider investment include:

- Using a portion of their Ryan White Care Act or Block Grant funds to provide funding for development of high quality recovery housing. In FY 2017, 13 states and the District of Columbia used federal pass-through funds in whole or in part to fund development of networks of Oxford Houses within their jurisdictions.<sup>6</sup>

4. <https://www.ssa.gov/policy/docs/rsnotes/rsn2001-02.html>

5. CA's 1115 waiver does permit 'recovery residences' to be part of Medicaid, but counties wishing to utilize that benefit have to use non-Medicaid money to pay for it.

6. Federal pass-through funds [CFDA # 93.959] were used by the District of Columbia, Delaware, Hawaii, Louisiana, New Jersey, North Carolina, Oklahoma, Oregon, South Carolina, Tennessee, Texas, Virginia, Washington and West Virginia to contract with Oxford House, Inc., to develop and maintain networks of Oxford Houses within their respective jurisdictions.

## RECOMMENDATION

The National Council recommends that states support efforts to engage in formal public communication efforts with the general public, people in recovery, and providers, and facilitate the creation of a public registry of certified recovery homes in the state, taking care to maintain the privacy of the exact locations of the homes and their residents. The registry should be updated in real time and include information regarding any available vacancies in a recovery residence.

### State Agencies Can Publish and Update Housing Lists

(f) The bureau shall prepare, publish and disseminate a list of alcohol and drug free housing certified pursuant to this section; provided, however, that the list shall be updated bimonthly. The list shall be disseminated to the director of the division of drug rehabilitation and to each state agency or vendor with a statewide contract that provides substance use disorder treatment services. The commissioner of probation shall inform all district and superior court probation officers and the chief justice of the trial court shall inform all district and superior court judges on how to access the list. The list shall also be posted on the website established pursuant to section 18.

— *Massachusetts Sober Homes Law; H.1828*

Section 2315-A. Registry. The department shall create and maintain a registry on its publicly accessible Internet website of all licensed or certified drug and alcohol recovery houses within this Commonwealth, which shall be updated annually by the department.

— *Pennsylvania Recovery Housing Law; SB 446*

## SECTION II: SUPPORTING RECOVERY HOUSING IN PRACTICE: ADDITIONAL QUALITY AND ACCESS CONSIDERATIONS

It is difficult to pinpoint how much recovery housing currently exists in the United States, but it is certainly not enough to meet demand. Although there is no inventory of recovery housing across the U.S., in terms of certified housing, NARR affiliates collectively support more than 25,000 individuals in 2,500 certified recovery houses. In 2017, Oxford Houses supported more than 18,000 beds within 2,300 homes and are located in 43 states. There are many more recovery homes that operate outside of these two nationally-recognized organizations. These homes often operate in isolation and states have an opportunity to account for all recovery housing operating in their states and provide supports and measures to ensure the quality and effectiveness of these homes. Efforts to improve the quality of recovery housing should:

- ▶ Identify opportunities for technical assistance and support
- ▶ Measure outcomes
- ▶ Ensure recovery housing is part of the continuum of care

### IDENTIFY OPPORTUNITIES FOR TECHNICAL ASSISTANCE AND SUPPORT

Most recovery housing providers are small, independent operations with few resources and limited connections to state or national level organizations or even other recovery houses. Oxford Houses are a notable outlier and even these often operate in isolation from recovery housing operators outside of the Oxford network. As states consider implementing policies and practices that ensure all recovery homes meet quality standards, they can also incorporate strategies to offer technical assistance and support. Below are some potential areas where states can capitalize on existing networks or foster new organizations.

#### Build Connections

- ▶ **Connect with state-level organizations.** State-level organizations supporting the network of recovery homes can be an invaluable resource for state agencies, the media, the local homes themselves and people looking for recovery housing. NARR State Affiliates<sup>8</sup> or Oxford House, Inc. can help implement quality standard certification processes, track the number of recovery homes and provide needed technical assistance – activities that can reduce the administrative burden for state agencies.
- ▶ **Support the creation and operation of state-level organizations.** Currently, there are NARR affiliates in 28 states with emerging state affiliates in three other states. If your state is interested in establishing a NARR affiliate, the national organization can provide technical assistance for creating a state-level affiliate. Existing recovery organizations, behavioral health coalitions or even larger recovery housing networks can become a NARR affiliate. As state-level organizations, NARR affiliates keep track of recovery homes that are working to meet or maintain NARR standards. Oxford House, which operates nationally, can also support those who are interested in creating new homes.<sup>9</sup> It has statewide associations in over 30 states.

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8. In Ohio, recovery homes pay an annual fee (approximately \$600) to the NARR State Affiliate to become certified. This fee helps to pay for the certification process.

9. Oxford House charters are authorized solely by Oxford House, Inc., the national umbrella organization. An Oxford House charter requires that all Oxford House groups must be single gender, accommodate a minimum of six individuals, be democratically self-run following the practices and procedures of the Oxford House Manual®, be self-supporting and pay all their bills on time and immediately expel any resident who drinks alcohol or uses illicit drugs. There is no cost for an Oxford House charter and there are no dues or fees for a group to operate an Oxford House.

## MEASURE OUTCOMES

Research indicates that recovery housing provides individuals with substance use disorders a greater chance of achieving long-term recovery than those who do not live in recovery-oriented environments (Polcin et al, 2010). Social support is a key component of recovery homes and has been shown to directly affect outcomes and help support continuous, long-term recovery. Over the last 30 years, Oxford House has been extensively evaluated and has shown impressive outcomes for individuals living in these recovery homes, including significantly lower substance use and incarceration rates and higher monthly incomes (Jason, 2006). Further, research has found that these homes are cost-effective and have a high return on their investment (Lo et al, 2007).

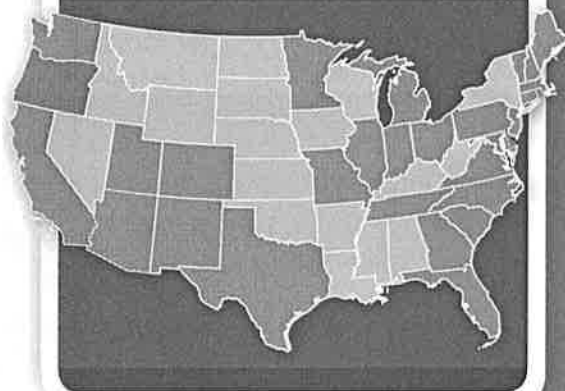
The Substance Abuse and Mental Health Services Administration (SAMHSA) requires states to use the National Outcome Measures (NOMs) to receive Block Grant and discretionary funding. While the NOMs vary in how the measures are applied, the National Council recommends that states include recovery housing efforts within its data collection efforts to gain a better picture of long-term treatment and recovery for people with addiction disorders. As states employ tools to increase the quality of recovery housing, they should include recovery homes in their outcomes measurement efforts. Possible outcome measures include:

- ▶ Change in employment or education status
- ▶ Change in earnings
- ▶ Housing stability (Do residents move on to living on their own after leaving recovery homes?)
- ▶ Criminal justice involvement
- ▶ Admissions and readmissions to treatment
- ▶ Recovery free from substances (over time)
- ▶ Social connectedness (Do residents connect with family, including custody? Do residents engage in communities? Does emotional well-being improve?)
- ▶ Civic engagement
- ▶ Access to needed physical and behavioral health services

- ▶ Ohio funded development of an outcomes database intended to support quality improvement efforts for recovery housing that meet the national quality standards. It also tells the story of who is accessing recovery housing and the resulting quality of their recovery.

## RECOMMENDATION

The National Council recommends that states support efforts to establish sustainable resources and a NARR affiliate organization or Oxford House to operationalize the recovery housing quality standard certification process. Having an Oxford House presence and an operational NARR affiliate will help states ensure quality, affordable housing for residents, ensure public and resident safety and allow states to track resident outcomes. The state of Ohio provided funds to start a NARR affiliate and administer the standards. The NARR affiliate is currently housed in the Ohio Council of Behavioral Health and Family Services Providers.





## SECTION III: SAMPLE LEGISLATIVE LANGUAGE

Throughout this toolkit, the National Council has offered examples of current state legislation, regulations or enacted laws that have addressed particular areas in improving the quality of and access to recovery residences. To date, no statute fully addresses all of our recommended components of a “model” policy on recovery housing and several state laws are not fully implemented. This is a work in progress and to facilitate further advocacy and adoption, the toolkit includes a full matrix, including a summary of legislation and links to the full text of the laws in Appendix A.

Drawing from legislative language from Florida, Indiana, Ohio, Pennsylvania and Massachusetts, the National Council compiled sample legislation to address the core policy recommendations of this toolkit. While we have made our best effort to use the best principles offered in actual legislation, we have made the following changes for consistency and readability:

1. Different states refer to substance use disorders with a variety of terms, such as drug and alcohol abuse, substance abuse, drug addiction, opioid addiction and others. In the Sample Legislative Language, the National Council has changed all language to read substance use disorders, which is the preferred term by recovery advocates and researchers. Whenever possible, legislation should use this terminology, with the recognition that some states will need to use different language to avoid having to change other sections of the statute.
2. State and local legislation may refer to recovery housing as recovery homes, recovery residences, sober-living homes, drug and alcohol-free homes or community residences. For clarity, the National Council recommends using the term recovery housing whenever possible.
3. In some cases, language does not exist to address the full spectrum of policies needed in this arena.
4. While this language focuses on recovery housing legislation and regulations, recovery housing should be considered as part of a larger effort to improve prevention and treatment of substance use disorders. States and localities should conduct an environmental scan to better understand the recovery housing capacity and geographic availability, populations served, affordability and populations served.<sup>10</sup>

### Strategic Considerations Ahead of Policy Initiatives

- ▶ Assess the environment (media attention; public officials making it a priority, zoning problems, existing networks of recovery housing - both formal and informal).
- ▶ Identify allies (NARR affiliate, Oxford House, champions, advocates).
- ▶ Assess the readiness of state agencies to prioritize both broader issues around substance use disorders and recovery housing.
- ▶ Prioritize solutions and incremental opportunities.
- ▶ Identify examples from other jurisdictions and need for adaptation to local need.
- ▶ Seek support and assistance from NARR, Oxford House and the National Council for Behavioral Health.

10. Paquette, K., Green, N., Sepahi, L., Thom, K., & Winn, L. (June 2013). Recovery Housing in the State of Ohio: Findings and Recommendations from an Environmental Scan. Center for Social Inclusion, New York, NY, and The Ohio Council of Behavioral Health & Family Service Providers, Columbus, OH. Retrieved from: <http://mha.ohio.gov/Portals/0/assets/Supports/Housing/OhioRecoveryHousingJune2013.pdf>



Recommendation/Section	Sample Language
<p>Enforcement of recovery housing quality standards by making the receipt of referrals and/or state and local funds dependent upon meeting recovery housing quality standards.</p>	<p>Referral: A state agency or vendor with a statewide contract that is providing treatment or services to a person or a state agency or officer setting terms and conditions for the release, parole, or discharge of a person from custody or treatment, shall not refer that person to recovery housing and shall not otherwise include in such terms and conditions a referral to recovery housing unless the recovery housing is certified pursuant to this section. Nothing in this section shall prohibit a residence that has not received certification from operating or advertising as recovery housing or from offering residence to persons recovering from substance use disorders.</p> <p>Receipt of State Funds: Recovery house owners who wish to receive state funds and referrals from licensed drug and alcohol treatment service providers will be required to become certified either through the NARR national standards or by registering as an Oxford House.</p> <p>A person operating recovery housing that is funded, in whole or in part, by the department or a federal, other state, or county agency, that has failed to attain or maintain licensure or certification of a recovery home and has not been licensed or certified by the department shall pay a fine of up to \$1,000 for each violation.</p>
<p>Support for NARR affiliate organization to operationalize the recovery housing quality certification process.</p>	<p>The state of {name of state} shall allocate \$XX to {name of organization} to maintain and track the recovery housing quality certification process and provide technical assistance and training for recovery housing operators in their continuous quality improvement efforts to meet the national standards. {name of organization} shall provide an annual report to the state behavioral health agency, and will report quarterly on any newly certified homes or homes that no longer meet the standards.<sup>11</sup></p>
<p>Data collection requirements as part of the certification process.</p>	<p>As part of the certification process of recovery homes, the affiliate shall collect outcome data as specified to meet the National Outcome Measures (NOMs) as required by the Substance Abuse and Mental Health Services Administration (SAMHSA). The state department of behavioral health shall use its discretion on which measures should apply to recovery housing. The state shall allocate \$XX in grant funds to the state affiliate to support the collection of this data.</p>

<sup>11</sup> Funding should be sufficient to ensure quality tracking of homes, outcomes measurement and adequate technical assistance. Exact amounts may vary by region.

## SECTION IV: REFERENCES

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State or Locality	Law or Regulation	Definition of Recovery Housing	Certification required to operate?	Certification required for referral?	Certification required for funding?	Further Description	Notes
Hawaii (2014)	Law: HRS § 321-193.7	"Voluntary Clean and Sober Homes" not defined.	No, however an unregistered home cannot advertise as a "registered clean and sober home."	Not referenced	Not referenced	Creates a voluntary "clean and sober homes registry" and prohibits homes from advertising as "registered clean and sober homes" unless they are registered and in good standing with the health department.  The health department shall establish procedures and standards by which homes will be allowed to be listed on the registry, including but not limited to: (1) Organizational and administrative standards; (2) Fiscal management standards; (3) Operation standards; (4) Recovery support standards; (5) Property standards; and (6) Good neighbor standards.	
Illinois (2003)	Regulation: Section 2060.509	Illinois has two distinct definitions of (licensed) recovery home and sober home as this regulation predates the NARR national standards.	No, the state licenses "recovery homes," but "sober homes" are not subject to the same requirements.	Not referenced	Not referenced	This regulation predates the NARR quality standards.  What Illinois calls "recovery homes" are licensed residential programs as opposed to "sober homes". This is an example of how nomenclature can be different across states.	This regulation does not address recovery housing quality standards.
Indiana (2017)	Law: SB 402	"Recovery residence" means an abstinence-based living environment for individuals that promotes recovery from: (1) alcohol and (2) other drug abuse and related issues.	No	Yes	Yes, recovery residences that receive funding from the family and social services agency must meet state standards.	SB 402 states that recovery residences must be certified as meeting NARR standards as well as any other standards developed in regulation in order to receive reimbursement for services from the family and social services agency.	Companion legislation allocates funds for certification and training programs mandated by the law.  Certified residences are qualified to participate in a state-funded housing voucher program called RecoveryWorks.
Massachusetts (2014)	Law: H. 828	"Alcohol- and drug-free housing" means a residence, commonly known as a sober home, that provides or advertises as providing an alcohol- and drug-free environment for people recovering from substance use disorders; provided that "alcohol and drug free housing" shall not include a halfway house, treatment unit or detoxification facility or any other facility licensed pursuant to section 7 of chapter 111E.	No	Yes, state-funded or state-operated treatment providers and re-entry agencies can only refer to certified homes.	Not referenced	According to the law, a certified housing list is made available by the state and is updated bimonthly. The department has established a process for receiving complaints against certified homes and can result in removal of their certification. The law outlines certification criteria.	The voluntary nature of this law was the result of a study finding that mandatory licensure or equivalent regulations would violate the Fair Housing Act and ADA.

## Current Statute: Section 2: Certification Required to Operate

State or Locality	Law or Regulation	Definition of Recovery Housing	Certification required to operate?	Certification required for referral?	Certification required for funding?	Further Description	Notes
Costa Mesa, California	Ordinances 14-13, 17-05, 17-06	<p>"Group home" – a facility that is being used as a supportive living environment for persons who are considered handicapped under state or federal law. A group home operated by a single operator or service provider (whether licensed or unlicensed) constitutes a single facility, whether the facility occupies one or more dwelling units. Group homes shall not include the following:</p> <p>(1) residential care facilities;</p> <p>(2) any group home that operates as a single housekeeping unit [see note 2].</p>	Yes Requirements vary depending on residential zone and number of residents.	n/a	n/a	<p>Mandatory Supplemental Use Permit or Conditional Use Permit (CUP) for any recovery-oriented housing.</p> <p>All recovery housing units, and housing operators, must be permitted (separate processes), with \$1,550 CUP fee for dwellings of more than six residents; CUPs are discretionary.</p> <p>See description and notes:</p> <ul style="list-style-type: none"> <li>◆ 650 ft. spacing requirement from any state-licensed residential facility (regardless of type) or from another subject residence.</li> <li>◆ Operating standards set in the ordinance, and require operators to implement rules in areas including relapse policy, drug testing policy, good neighbor, notification of neighbors.</li> <li>◆ Discharged residents to be returned to place of origin at operator's expense.</li> <li>◆ Addresses of permitted residences are public information.</li> <li>◆ Background checks and Live Scans for all residence operators and officers of provider entity, at operator's expense.</li> </ul> <p>Additional requirements are being imposed in the permitting process, outside of the enabling legislation, including:</p> <ul style="list-style-type: none"> <li>◆ Maximum of two out-of-state residents at any one time</li> <li>◆ Indemnification: if the city is sued on the basis of granting approval, provider will pay city's defense costs.</li> </ul>	<p>1. These ordinances are currently the subject of two federal lawsuits.</p> <p>2. To date no applicant has been granted the single housekeeping unit exemption, despite several applications requesting the exemption.</p>

State or Locality	Law or Regulation	Definition of Recovery Housing	Certification required to operate?	Certification required for referral?	Certification required for funding?	Further Description	Notes
Arizona (2016)	Law: HB 2107	"Structured sober living home" means any premises, place or building that provides alcohol-free or drug-free housing, promotes independent living and life skill development and provides structured activities that are directed primarily toward recovery from substance use disorders in a supervised setting to a group of unrelated individuals who are recovering from drug or alcohol addiction and who are receiving outpatient behavioral health services for substance abuse or addiction treatment while living in the home.	Yes, allows localities to issue this requirement.	Yes, allows localities to issue this requirement.	Yes, allows localities to issue this requirement.	<p>A city or town may adopt by ordinance standards for structured sober living homes that comply with state and federal fair housing laws and the Americans with Disabilities Act (ADA). If adopted, the standards for structured sober living homes may include:</p> <ol style="list-style-type: none"> <li>1. A written notification from all structured sober living homes that includes: <ol style="list-style-type: none"> <li>(a) The name and address of the structured sober living home.</li> <li>(b) The following information regarding the property: <ol style="list-style-type: none"> <li>(i) The property owner's name, address and contact telephone number.</li> <li>(ii) If the property is leased, a copy of the lease that states that the property will be used as a structured sober living home.</li> </ol> </li> </ol> </li> <li>2. Supervision requirements in the structured sober living home for the residents during all hours of operation.</li> <li>3. Establishment and maintenance of an operation plan that facilitates the rehabilitative process, including discharge planning, and that addresses the maintenance of the property and noise abatement consistent with local ordinances.</li> </ol>	Arizona created this state-level legislation to address zoning concerns in a specific municipality. However, at least two municipalities with similar measures are currently subject to federal fair housing lawsuits. As a result, local government laws enacted following this legislation may violate federal fair housing laws.
New Jersey (2017)	Enacted Regulations; Title 5 Chapter 27; Amendments to Rooming and Boarding Act (See Department of Community Affairs final ruling)	"Cooperative sober living residences" means a residential setting that serves solely as a home for individuals who are recovering from drug or alcohol addiction and is intended to provide an environment where the residents can support each other's sobriety and recovery.	Yes	Not referenced	Not referenced	<p>Homes are licensed by the Department of Consumer Affairs (DCA) and subject to an inspection process. Must meet municipal code for single family home and have 10 or fewer residents including staff. Must have at least one resident staff person. Staff can be onsite and their numbers/hours can be determined by owner.</p> <p>Includes a list of requirements and prohibitions including: residence may not provide transport, laundry, food. Programmatic activities are limited. Drug/alcohol testing is optional.</p>	<p>The definition, operating requirements and enforcement rules were enacted administratively, not via legislation.</p> <p>Pending legislation S948 and A3288 would define licensed cooperative sober living residences as beneficial uses, with implications for local zoning requirements that often reference such uses.</p>

## Currently Proposed, File and/or Pending Legislation

State or Locality	Law or Regulation	Definition of Recovery Housing	Certification required to operate?	Certification required for referral?	Certification required for funding?	Further Description	Notes
Federal	H.R. 4694 (2017)	The term "recovery housing" means a family-like, shared living environment free from alcohol and illicit drug use and centered on peer support and connection to services that promote sustained recovery from substance use disorders.	No	Not referenced	Not referenced	Ensuring Access to Quality Sober Living Act of 2017 allocates funding to SAMHSA to publish best practices for operating recovery housing, based on — (A) the applicable domains, core principles, and standards of the National Alliance for Recovery Residences; and (B) input from other nationally accredited recovery housing entities and from stakeholders; (2) shall disseminate such best practices to the government of each State; and (3) may provide technical assistance to States seeking to adopt or implement such best practices.	Allocates \$3 million to SAMHSA to support this mandate.
Arizona	Bill SB 1465 (2018)	"Sober living home" means any premises, place or building that provides alcohol — free or drug — free housing and that: (a) promotes independent living and life skills development, (b) may provide activities that are directed primarily toward recovery from substance use disorders, (c) provides a supervised setting to a group of unrelated individuals who are recovery from substance use disorders, (d) does not provide any medical or clinical services or medication administration on-site, except for urinalysis testing.	Not yet determined, but currently yes.	Yes	Yes	The bill would establish a licensure process for sober living homes. To do this, the bill specifies that the Arizona Department of Health Services is required to contract with an approved certifying organization affiliated with an approved national organization to certify homes and address complaints. "Approved national organization" describes NARR. Certifying organization must be affiliated with the designated national organization.  The bill enumerates a number of required standards for sober living homes, many of which are duplicative of NARR quality standards.  State-licensed or funded addiction treatment providers would only be permitted to make referrals to certified homes. Courts are to first consider certified homes for referral. A list of certified sober living homes would be published online and updated quarterly.  The AZ Department of Health Services would be required to report certain statistical information to the state annually. State may contract with third parties to perform some of the licensure functions on its behalf.  Third party certification as provided in the text will be accepted in lieu of state licensure during a two-year transition/rulemaking period. Thereafter, certification will exempt the licensee from annual state site inspections.	If certification becomes mandatory, this could raise significant fair housing issues. (Enforcement of Utah's mandatory certification process is currently under injunction by a federal court.)

State or Locality	Law or Regulation	Definition of Recovery Housing	Certification required to operate?	Certification required for referral?	Certification required for funding?	Further Description	Notes
Maine	SP 618/LD 1682 and related bill SP 419	"Recovery residence" means a group residence providing an alcohol-free and drug-free environment for persons recovering from substance use disorders.	No	Not referenced	Yes, including expansion of an existing program to cover substance use disorders (SUDs).	This bill directs the Department of Health and Human Services to establish standards for recovery residences based on standards established by the National Alliance for Recovery Residences. It also authorizes the Bridging Rental Assistance Program to assist persons with substance use disorders involving opioids with housing placement in 8 recovery residences, including residences in which residents share rooms.  Related bill: SP 491 This resolve establishes the Help Me Recover Fund within the Department of Health and Human Services to provide grants to persons being discharged from detoxification or residential treatment programs to use as a deposit and first month rent payment for housing in a recovery residence. To be eligible for a grant from the fund a person must be financially unable to provide a deposit and first month rent payment. The bill directs the department to enter into a contract with a nonprofit organization with experience in substance use disorder treatment or recovery to administer and make distributions from the fund.	Revisions to the Bill (SP 618/LD 1682) pending. This information reflects the revisions current as 2/9/2018.
New Jersey	A5507 (2018)	"Recovery residence" means housing with a home-like atmosphere, which is available in either a professionally-managed facility or a peer-managed facility, and which provides a sober living environment and alcohol and drug free living accommodations to individuals with substance use disorders, or to individuals with co-occurring mental health and substance use disorders, but which does not provide clinical treatment services for mental health or substance use disorders. "Recovery residence" includes, but is not limited to, a facility that is commonly referred to as a sober living home.  "Peer-managed facility" means a recovery residence that is not directly managed, on a day-to-day basis, by a recovery residence administrator, but which, instead, is self-managed, on a cooperative basis, by the residents in recovery who are renting rooms at the facility.	No	Yes	Not referenced	Creates a voluntary certification program, based on NARR standards, to be administered by an independent organization designated by the Department of Health (DOH). The bill would require the DOH to use a portion of the moneys annually appropriated thereto to provide appropriate funds to the credentialing entity, on an annual basis, to enable the credentialing entity to fulfill its duties and responsibilities under the bill's provisions.  A health care practitioner or substance use disorder treatment provider will be prohibited from referring a patient to a recovery residence, unless the recovery residence is listed as a certified recovery residence (licensed providers referring to housing they own are exempt).  Requires that the residence and an individual administrator be certified under procedures to be developed as a result of this law.  Exempts certified residences from the provisions of the Rooming and Boarding House Act of 1979, P.L.1979, c.496 (C.55:138-1 et seq.) and any rules or regulations adopted pursuant thereto. A certified recovery residence will be exempt from any rules and regulations governing the operation or certification of recovery residences or sober living homes adopted by Department of Community Affairs, the Department of Health, or the Department of Human Services prior to the bill's effective date. This bill will effectively supersede all other pre-existing rules and regulations on this issue. In short, it would preempt the state's provisions adopted administratively in December 2017 and described above in this table.	

## Why is Recovery Housing Important?

High quality recovery housing provides the longer term supports necessary to empower people in recovery to rebuild their lives and reconnect to the community at large.

- ▶▶ Initial inpatient treatment for addiction may last as few as 12 days. Long-term recovery takes different lengths of time for different people and some would say it takes a lifetime.
- ▶▶ Individuals with histories of addiction often lack essential recovery capital — the internal and external resources needed to help individuals initiate, stabilize and sustain long-term recovery — which inhibits their ability to secure safe, stable housing and employment.
- ▶▶ Without flexible, supportive, recovery-focused housing options, many people are more likely to return to using substances, leading to:
  - ▶▶ Excessive use of emergency departments and public and private health care systems;
  - ▶▶ Higher risk for involvement with law enforcement and incarceration;
  - ▶▶ Inability to obtain and maintain employment; and
  - ▶▶ Failure to build stable relationships.
- ▶▶ House managers or Oxford House™ residents are often trained in peer recovery support and can offer modeling for recovery to the individual in recovery.
- ▶▶ Recovery residences following best practices develop personalized recovery plans with each resident. These plans allow for goal-setting across all aspects of a person's life (health, family, employment, community, etc.). Progress toward recovery goals is guided by peer leaders or residence staff and is measured regularly. Requiring that all recovery housing residents have a personalized recovery plan is an essential tenet of the National Alliance for Recovery Residences (NARR) recovery housing quality standards.

## Is Recovery Housing Effective?

- ▶▶ In the most extensively studied model — Oxford House™ — it has been shown that people who live in Oxford Houses have:
  - ▶▶ Decreased substance use (31 percent compared to 65 percent)
  - ▶▶ Reduced probability of relapse (22 percent compared to 47 percent)
  - ▶▶ Lower rates of incarceration (3 percent compared to 9 percent)
  - ▶▶ Higher incomes (\$989 compared to \$440)
  - ▶▶ Increased employment (76 percent compared to 49 percent)
  - ▶▶ Improved family functioning (30 percent of women regained custody of their children compared to 13 percent of those in normal living situations)
- ▶▶ Researchers have documented cost savings of \$29,000 per person, when comparing residency in a peer-run Oxford House™ to returning to a community without recovery supports. This factors in the cost of substance use, illegal activity and incarceration that might occur.



## APPENDIX

### RECOVERY HOUSING STATE LEGISLATIVE TOOLKIT

#### RESOURCE LIST

##### ISSUE BRIEFS

Recovery Housing Issue Brief: Information for State Policymakers (May 2017). National Council for Behavioral Health.

Recovery Housing Policy Brief (December 2015). U.S. Department of Housing and Urban Development.

##### STANDARDS

Code of Ethics (July 2016). National Alliance for Recovery Residences.

NARR Quality Standards (2015). National Alliance for Recovery Residences.

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##### FEDERAL POLICIES AND EFFORTS

Access to Recovery Implementation Toolkit (November 2010). Substance Abuse and Mental Health Services Administration.

Facing Addiction in America: Surgeon General's Report on Alcohol, Drugs, and Health (November 2016). U.S. Department of Health and Human Services.

Hearing Examining Concerns of Patient Brokering and Addiction Treatment Fraud (December 12, 2017). U.S. House of Representatives Energy and Commerce Committee.

Joint Statement Of The Department Of Housing And Urban Development And The Department Of Justice State And Local Land Use Laws And Practices And The Application Of The Fair Housing Act. (November 10, 2016). U.S. Department Of Housing And Urban Development Office Of Fair Housing And Equal Opportunity And U.S. Department Of Justice, Civil Rights Division.

Letter to GAO from Senators Warren, Hatch and Rubio, June 2, 2016.

President's Commission on Combating Drug Abuse and Opioid Crisis Final Report, November 1, 2017.<sup>1</sup>

The Anti-Drug Abuse Act of 1988 specifically included a section entitled "Group Homes for Substance Abusers" [§2036 of PL 100-690] to encourage the national development of self-run, self-supported recovery homes.

10. Paquette, K., Green, N., Sepahi, L., Thom, K., & Winn, L. (June 2013). Recovery Housing in the State of Ohio: Findings and Recommendations from an Environmental Scan. Center for Social Inclusion, New York, NY, and The Ohio Council of Behavioral Health & Family Service Providers, Columbus, OH. Retrieved from: <http://mha.ohio.gov/Portals/0/assets/Supports/Housing/OhioRecoveryHousingJune2013.pdf>

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Wedell, K., and Oplinger, D. "Drug crisis in Ohio: What solutions are making a difference?" The Dayton Daily News, January 21, 2018.

#### OP-EDS/LETTERS TO THE EDITOR

Noe, Killian. "Recovery communities are crucial to combat opioid epidemic," The Seattle Times, September 21, 2018.

Schina, Valerie. "Letter to the Editor: What a good recovery house should have," The Delaware County Daily Times, July 23, 2017.

#### ORGANIZATIONS

Association of Recovery in Higher Education

Association of Recovery Schools

Faces & Voices of Recovery

Facing Addiction with NCADD

Association of Recovery Community Organizations

National Alliance for Recovery Residences

National Council for Behavioral Health

National Association of Addiction Treatment Providers (NAATP)

Oxford House

Phoenix Multisport

Young People in Recovery

► How does recovery housing capacity in your state compare to the need, in these respects:

- ☐ Geographic distribution
- ☐ Support for at-risk and vulnerable populations
- ☐ Quality
- ☐ Affordability

► What legislation or regulations are already in place regarding recovery housing? How would these existing policies help or hinder any effort to improve recovery housing in your state?

► Are there non-legislative or non-regulatory activities that can be started right away to improve access to or the quality of recovery housing in your state? For example, are there any upcoming opportunities to educate community stakeholders about the value of recovery housing and/or gain public support for recovery housing?

► What are the biggest challenges to moving forward to improve existing policies or introduce new legislation or regulations to improve recovery housing in your state?

**National Outcome Measures (NOMs)** are data outcome measures over 10 domains identified by SAMHSA that embody meaningful, real-life outcomes for people who are striving to attain and sustain recovery, build resilience and work, learn, live and participate fully in their communities. SAMHSA requires states to use NOMs to receive Block Grant and discretionary funding. The 10 domains are abstinence, employment/education, crime and criminal justice, stability in housing, access/capacity, retention, social connectedness, perception of care, cost-effectiveness and use of evidence-based practices.

**Oxford House™** is a model of recovery housing that is democratically run, self-supporting and alcohol-and drug-free. Oxford House, Inc., is a nonprofit umbrella organization which oversees the network of all Oxford Houses, allocates resources to duplicate the Oxford House™ model and is the sole source for granting Oxford House™ charters at no charge and providing technical assistance where the need arises. In 2011, the Oxford House™ Recovery Home Model was listed on the National Registry of Evidence-based Programs and Practices. Oxford Houses have an extensive network of 2,300 houses spread across 43 states with a capacity of 18,000 beds.

**Peer Support** is the process of giving and receiving encouragement and assistance to achieve long-term recovery. Peer support providers offer emotional support, share knowledge, teach skills, provide practical assistance and connect people with resources, opportunities and communities of support. Peer support providers offer their unique lived experience with mental health conditions and/or substance use disorders to provide support.

**Permanent Supportive Housing (PSH)** provides service-enriched permanent housing for people with disabilities, including those in recovery from addiction, and generally includes individuals with serious forms of disability that prevent them from living independently. These individuals often have co-occurring disorders and the housing generally does not have sobriety requirements.

**Reasonable Accommodation** is a change, exception or adjustment to a rule, policy, practice or service that may be necessary for a person with a disability to have an equal opportunity to use and enjoy a dwelling, including public and common use spaces. The Fair Housing Act makes it unlawful for states and localities to refuse to make reasonable accommodations to rules, policies, practices or services, when such accommodations may be necessary to afford people with disabilities an equal opportunity to use and enjoy a dwelling (HUD and DOJ, 2016). Examples of common reasonable accommodation requests accepted for recovery housing include asking for a waiver of the cap on unrelated persons permitted to live in a dwelling and asking for the dwelling to be treated as single family use.

**Recovery**, as defined by SAMHSA, is a process of change through which individuals improve their health and wellness, live self-directed lives and strive to reach their full potential. Recovery is built on access to evidence-based clinical treatment and recovery support services for all populations. Recovery does not have a singular consensus definition within the addiction field and recovery community. Other commonly accepted definitions of recovery include Hazelden Betty Ford's definition of recovery as "a voluntarily maintained lifestyle characterized by sobriety, personal health, and citizenship," and scholar William White's definition that states, "Recovery is the experience (a process and a sustained status) through which individuals, families, and communities impacted by severe alcohol and other drug (AOD) problems utilize internal and external resources to voluntarily resolve these problems, heal the wounds inflicted by AOD-related problems, actively manage their continued vulnerability to such problems, and develop a healthy, productive, and meaningful life."